

600

## PLACE OF DEATH

## ARIZONA STATE BOARD OF HEALTH

County

Yuma

BUREAU OF VITAL STATISTICS

State Index No. 833

District

Yuma City

## ORIGINAL CERTIFICATE OF DEATH

County Registered No. 73

Town

Yuma

Local Registrar's No. 73

Or City

No. 15 Ave. St.

(If death occurred in a Hospital or Institution, give its NAME instead of street and number.)

FULL NAME

Mike Ghiatto

## PERSONAL AND STATISTICAL PARTICULARS

SEX

Masculine

Color or Race

White Indian  
Black Chinese  
Mexican

SINGLE

MARRIED  
WIDOWED  
OR DIVORCED

DATE OF BIRTH

August 30 1907  
(Month) (Day) (Year)

AGE

7 yrs. 3 mos. 18 days If less than 1 day

OCCUPATION

(a) Trade, profession or particular kind of work  
(b) General nature of industry, business, or establishment in which employed or (employer)

BIRTHPLACE

(State or country)

Yuma, County

NAME OF FATHER

Mike Ghiatto

BIRTHPLACE OF FATHER

(State or country)

Italy - Genova

MAIDEN NAME OF MOTHER

Jesusita Morales

BIRTHPLACE OF MOTHER

(State or country)

Yuma, County

THE ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE

(Informant)

A. Johnson

(Address)

Yuma, Ariz.

PLACE OF BURIAL OR REMOVAL

DATE OF BURIAL OR REMOVAL

Yuma Cemetery

Dec. 14, 1914

UNDERTAKER

ADDRESS

A. Johnson

Yuma, Ariz.

## MEDICAL CERTIFICATE OF DEATH

DATE OF DEATH

Dec. 12 1914  
(Month) (Day) (Year)

I hereby certify, that I attended deceased from

191 to 191; that I last saw h alive

on 191, and that death occurred on the date

stated above at M. The DISEASE or INJURY causing

Death was as follows: pneumonia

(Duration) yrs. mos. days

Was disease contracted in Arizona? yes

If not, where? Yuma

CONTRIBUTORY

(Duration) yrs. mos. days 3

(Signed) J. L. A. Hamilton

191 (Address)

\*In deaths from VIOLENT CAUSES state (1) MEANS OF INJURY and (2) whether ACCIDENTAL, SUICIDAL, or HOMICIDAL.

LENGTH OF RESIDENCE

At place of death yrs. mos. ds. In Arizona yrs. mos. ds.

Former or Usual Residence

Filed Jan 1 1915

Filed Jan 10 1915

County Registrar